

AMENDMENT TRANSMITTAL LETTER			Docket No. 05986/100K504-US1
Application No. 10/624,942-Conf. #7691	Filing Date July 21, 2003	Examiner J. M. Kim	Art Unit 1617

Applicant(s): Marco Pappagallo

Invention: TREATMENT OF SPINAL MECHANICAL PAIN

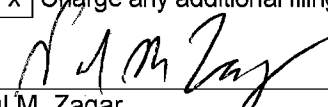
TO THE COMMISSIONER FOR PATENTS

Transmitted herewith is an amendment in the above-identified application.

The fee has been calculated and is transmitted as shown below.

CLAIMS AS AMENDED						
	Claims Remaining After Amendment	Highest Number Previously Paid	Number Extra Claims Present	Rate		
Total Claims	11	- 20 =	0	x	25.00	0.00
Independent Claims	1	- 3 =	0	x	105.00	0.00
Multiple Dependent Claims (check if applicable) <input type="checkbox"/>						
Other fee (please specify):						
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT:						0.00

- ☐ Large Entity ☒ Small Entity
- ☒ No additional fee is required for this amendment.
- ☐ Please charge Deposit Account No. _____ in the amount of \$ _____.
A duplicate copy of this sheet is enclosed.
- ☐ A check in the amount of \$ _____ to cover the filing fee is enclosed.
- ☐ Payment by credit card. Form PTO-2038 is attached.
- ☒ The Director is hereby authorized to charge and credit Deposit Account No. 04-0100
as described below. A duplicate copy of this sheet is enclosed.
- ☒ Credit any overpayment.
- ☒ Charge any additional filing or application processing fees required under 37 CFR 1.16 and 1.17.


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Dated: June 30, 2008

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